## 2005 NOT-FOR-PROFIT CORPORATION **ANNUAL REPORT (AR)**

## Jun 22, 2005 8:00 am **Secretary of State** DOCUMENT # N47843 1. Entity Name 06-22-2005 90077 021 \*\*\*\*61.25 KOREAN REFORMED PRESBYTERIAN CHURCH, INC. Principal Place of Business Mailing Address 15120 PENNINGTON ROAD 8300 7TH ST. N. **TAMPA FL 33624** ST. PETERSBURG FL 33702 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. 1st MOORE CR2E037 (10/04) City & State City & State 4. FEI Number Applied For 59-3101660 Not Applicable Zip Country Zip Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent BAK, SUNG J Street Address (P.O. Box Number is Not Acceptable) 8300 7TH ST. N. --ST. PETERSBURG FL 33702 City Zip Code FL 8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent. SIGNATUŖE Signature, typed or printed harge of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) FILE NOW: FEE IS \$61.25 9. Election Campaign Financing \$5.00 May Be Make Check Payable to Trust Fund Contribution. Due By May 1, 2005 Added to Fees Florida Department of State OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 10. 11. PRES TITLE ☐ Delete TITLE PRES BAK, SUNG J BAK, Joseph NAME 8300 7TH ST: N. . . 8300 7th st. N STREET ADDRESS STREET ADDRESS ST. PETERSBÜRG FL 33702 33702 FI CITY-ST-7IP petersburg CITY-ST-7IP SEC BAK, WON B Change Addition TITLE ☐ Delete TITLE BAK, WON B NAME NAME 8300 7TH ST. N. STREET ADDRESS STREET ADDRESS petersburg F133702 8300 ST PETERSBURG FL 33702 CITY-ST-ZIP CITY-ST-ZIP TRES TITLE Delete TITE ☐ Addition Hee Jeong PARK, YOUNG NAME NAME Nan potica Rd. NE 347 PATICA RD. N.E. STREET ADDRESS 347 \$+, STREET ADDRESS ST PETERSBURG FL 33702 CITY-ST-ZIP peters burg CITY-ST-ZIP ☐ Addition Change TITLE ☐ Delete TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Delete TETLE [ ] Change Addition

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 617, Florida Statutes; and that my name appears in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

NAME

TITLE

NAME

STREET ADDRESS

STREET ADDRESS

CITY-ST-7IP

CITY-ST-ZIP

SIGNATURE:

NAME STREET ADDRESS

TITLE

NAME

CITY-ST-ZIP

STREET ADDRESS

CtTY-SI-71P

INTED NAME OF SIGNING OFFICER OR DIRECTOR

☐ Delete

FILED

☐ Change

☐ Addition